

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i>		Application Number	10/517,439
Address to:		Filing Date	December 10, 2004
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		First Named Inventor	Thomas Hesterkamp et al.
		Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned
		Attorney Docket No.	37998-237325

Please change the Correspondence Address for the above-identified application to:

The address associated with Customer Number: 26694

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City		State	Zip
Country			
Telephone			Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

Applicant/Inventor
 Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 Attorney or agent of record. Registration Number 54,262.
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature *Kavita B. Lepping*
 Typed or Printed Name Kavita B. Lepping

Date December 4, 2006 Telephone (202) 344-4000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 Form is/are submitted.